STATE OF CALIFORNIA - THE RESOURCES AGENCY

ARNOLD SCHWARZENEGGER, Governor

DEPARTMENT OF WATER RESOURCES
CENTRAL DISTRICT
NORTHERN DISTRICT
3251 S Street
2440 Main Street

Sacramento, CA 95816 (916) 227-7632 (916) 227-7600 (Fax) NORTHERN DISTRIC 2440 Main Street Red Bluff, CA 96080 (530) 529-7300 (530) 529-7322 (Fax) SAN JOAQUIN DISTRICT 3374 East Shields Avenue Fresno, CA 93726 (559) 230-3300 (559) 230-3301 (Fax) SOUTHERN DISTRICT 770 Fairmont Avenue Glendale, CA 91203 (818) 543-4600 (818) 543-4604 (Fax)

WELL COMPLETION REPORT REQUEST--OWNER

Use this form to request a copy of the Well Completion Report on file with the California Department of Water Resources for a well you own. Describe the well below. California Water Code Section 13752 permits release of Well Completion Reports from DWR files on written request by the well owner. DWR requires the township, range, and section where the well is located to start a search. Attach a map or a sketch with north indicated, and as much identifying information listed below as possible. Use additional paper if necessary.

Location of well (city or county)		Year drilled		
Street address				
Distances and directions from cross streets or other				
Township, Range, S				
Owner at time of drilling	Driller			
Depth of well Diameter and type of	casing			
Other identifying information, such as assessor's p number, well number, well completion report numb	earcel number (coer, driller, date o	on tax statement), subdiv completed, (other)	vision or tract, lot	
I certify that I am the present owner of the well described above.	someone	this part only if you w other than yourself. P ompletion Report to:	ish a copy sent to lease send a copy of	
Name (please print)	Name/Con	npany		
Address	Address			
City, State, and Zip Code	City, State, and Zip Code			
Telephone ()	Telephone ()			
Fax ()	Fax ()		
Date	Date	Date		
E-mail	E-mail			
Signature	Owner's Si	Owner's Signature Authorizing Release		